

CLAIMS ONLY						Application Number 10/716295	Filing Date		
						Applicant(s)			
						* May be used for additional claims or amendments			
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
		Indep	Depend	Indep	Depend	Indep	Depend		
1		1							
2			1						
3				1					
4					1				
5						1			
6							1		
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21		1							
22			1						
23				1					
24					1				
25						1			
26							1		
27									
28									
29									
30									
31									
32									
33									
34									
35									
36									
37									
38									
39									
40									
41									
42									
43									
44									
45									
46									
47									
48									
49									
50									
Total Indep		3							
Total Depend		10							
Total Claims		9							